

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
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45						
46						
47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
51		4				
52	1					
53		1				
54		2				
55	1					
56		1				
57		2				
58	1					
59	1					
60	1					
61		1				
62	1					
63		1				
64		16				
65		4				
66		4				
67		2				
68		2				
69	1					
70	1					
71	1					
72	1					
73		1				
74		1				
75	1					
76		1				
77		1				
78		1				
79		1				
80		1				
81		1				
82	1					
83						
84						
85	1					
86						
87						
88						
89						
90	1					
91	1					
92		1				
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.	18					
TOTAL DEP.						
TOTAL CLAIMS						

168